



Docket No. 5724.092.00-US  
(PATENT)

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Patent Application of:  
Jose Francisco Gómez Insa

Customer No. 30827

Application No. 10/800,029

Confirmation No. 6865

Filed: March 15, 2004

Art Unit: 3635

For: MOLDING PROFILE AND MOLDING  
PROFILE ASSEMBLY

Examiner: Elizabeth A. Plummer

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**AMENDMENT**

Sir:

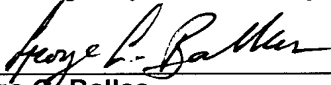
In response to the Office Action dated January 16, 2007, please amend the patent application identified above as follows:

**INTRODUCTORY COMMENTS**

**Amendments to the Claims** are reflected in the listing of claims which begins on page **2** of this paper.

**Remarks** begin on page **8** of this paper.



AMENDMENT TRANSMITTAL LETTER				Docket No. 5724.092.00	
Application No. 10/800,029	Filing Date March 15, 2004	Examiner PLUMMER, Elizabeth A.	Art Unit 3635		
Applicant(s): GOMEZ INSA, Jose Francisco					
Invention: MOLDING PROFILE AND MOLDING PROFILE ASSEMBLY					
<b>TO THE COMMISSIONER FOR PATENTS</b>					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
<b>CLAIMS AS AMENDED</b>					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	8	- 28 =		x \$50.00	0.00
Independent Claims	1	- 3 =		x \$200.00	0.0
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify):					
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b>					<b>\$0.00</b>
<input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity					
<input checked="" type="checkbox"/> No additional fee is required for this amendment.					
<input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____. A duplicate copy of this sheet is enclosed.					
<input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.					
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.					
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>50-0911</u> as described below. A duplicate copy of this sheet is enclosed.					
<input checked="" type="checkbox"/> Credit any overpayment.					
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.					
 <b>George G. Ballas</b> Attorney Reg. No.: 52,587				Dated: <u>21 May 2007</u>	